

## Jefferson County Intimate Partner Fatalities Thirty Incidents From 2007 - 2012

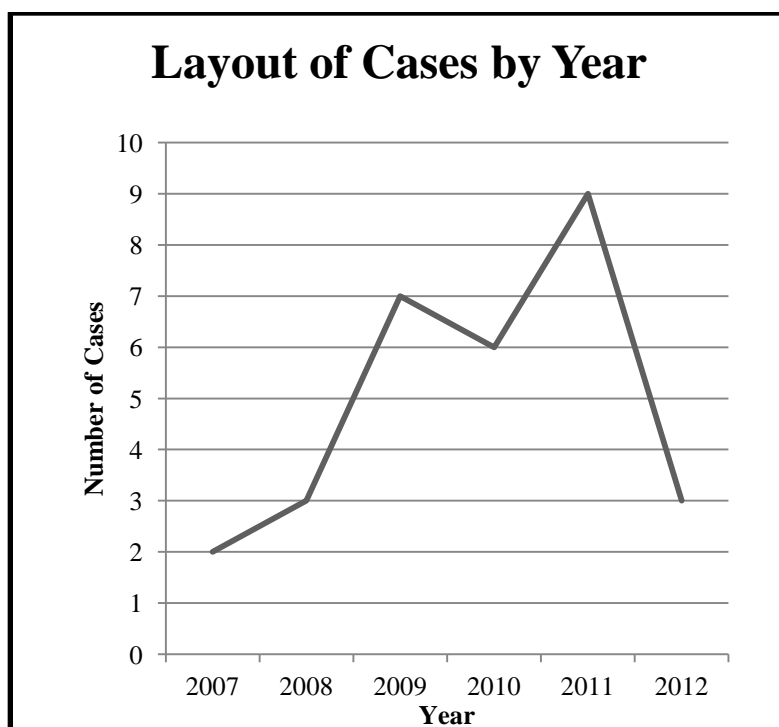
This report is an incident based examination of thirty incidents classified as domestic violence fatalities involving intimate or former intimate partners, in Jefferson County, Kentucky from 2007-2012. The thirty incidents represent approximately 25% of domestic violence fatality incidents during the period from 2007-2012. The researcher relied upon publically available information such as news reports and findings were compared to national and local reports and studies.

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### Domestic Violence Fatality Research Jefferson County

This project searched for commonalities, trends, and indicators by processing data from 30 different domestic violence incidents that occurred in Jefferson County, Kentucky. There are numerous limitations on domestic violence research. First of all, domestic violence research is limited by confidentiality laws that limit the information that can legally be released to the public. Also, domestic violence research uses data from numerous DV<sup>1</sup> services; however, these services are not utilized by all domestic violence victims. This creates a gap in the research on domestic violence. In particular, this research was restricted to public sources of information. The sources used for this research were local newspapers, public reports and databases. Unfortunately, domestic violence cases that are exposed in public sources tend to be chosen because of their “saleable” aspects, rather than at random. Due to this fact, cases that were used in this research may be biased. However, the data that was used from each of the incidents was verified by at least three sources to confirm the information used provided an accurate portrayal. Please note that all inferences drawn from this research is a matter of opinion not fact.

This research is comprised from the following layout of domestic violence cases for Jefferson County from the year 2007 to 2012:

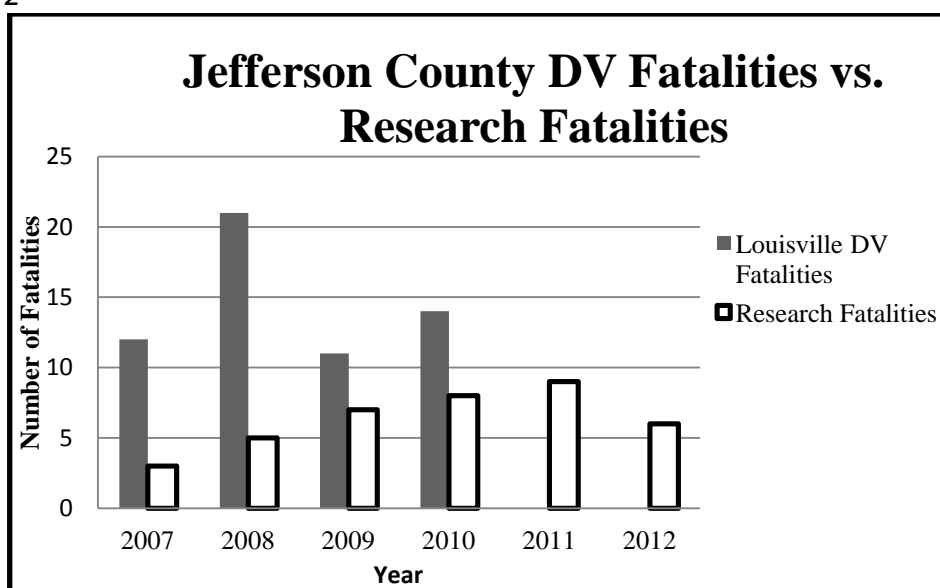


<sup>1</sup> DV is an abbreviation for domestic violence.

These cases involved deaths classified as domestic violence fatalities of the primary victim (who was the intimate partner or former intimate partner of the offender), secondary victim, and/or the offender. A domestic violence fatality is defined by the Louisville Metro Fatality Review Committee as “any deaths caused directly or indirectly by the manifestations of domestic violence. Domestic violence fatalities potentially include the intended victim, the perpetrator, or as secondary victims as a means of the perpetrator hurting the primary domestic violence victim.”<sup>2</sup>

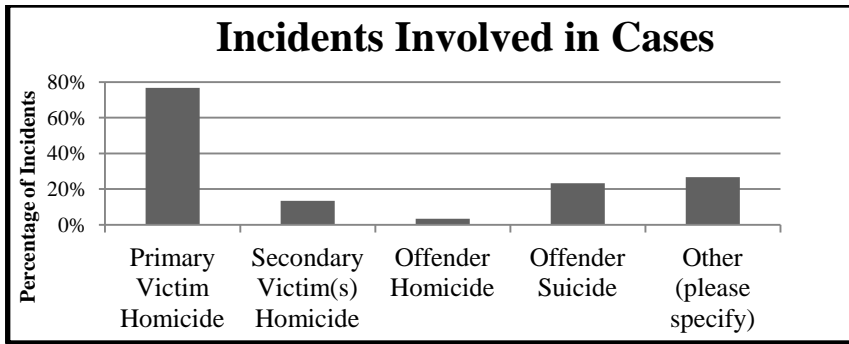
The number of fatalities used for this research was comparable to the number of domestic violence fatalities reported by Jefferson County in the Louisville Metro Domestic Violence Prevention Coordinating Council Fatality Review<sup>2</sup>. The fatalities included in this research accounted for approximately 25% of the total number of domestic violence fatalities in Jefferson County [see graph 2]. Therefore, the cases used in this research are representative of all of the incidents resulting in fatalities in Jefferson County.

Graph 2



There were 7 different types of incidents that occurred in the 30 cases. The most common incident was for the offender to murder the primary victim. This accounted for 73% of the cases that were reviewed from 2007-2012 [see graph 3]. The next most common incident involved in the cases were “other” situations. These included attempted homicide of either the primary or secondary victim, or primary victim suicide. In the third most common category the offender committed suicide after murdering or attempting to murder a victim.

<sup>2</sup> Louisville Metro Domestic Violence Prevention Coordinating Council- Fatality Review Committee 2009-2010 Report: released October 2011

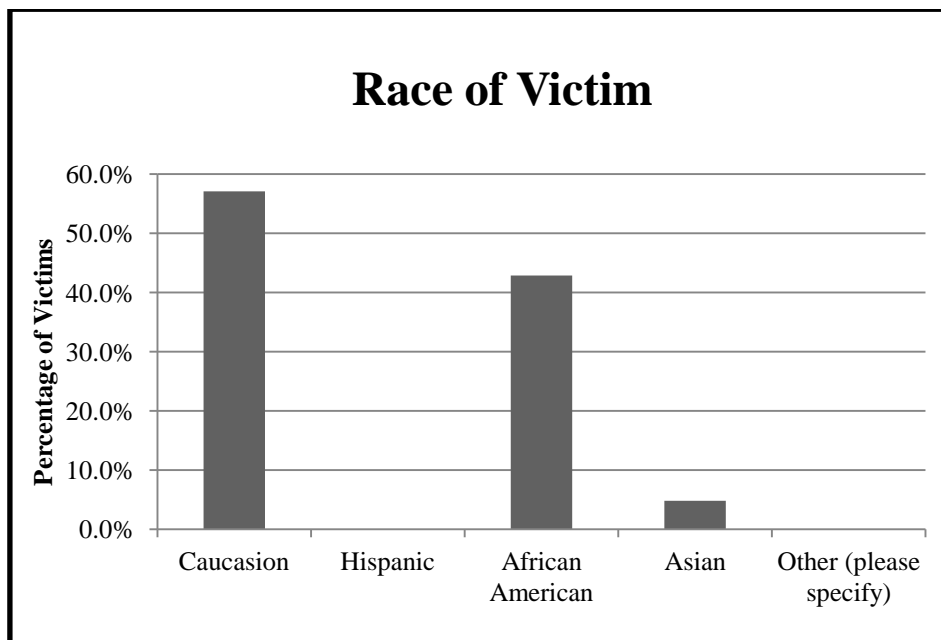


Graph 3

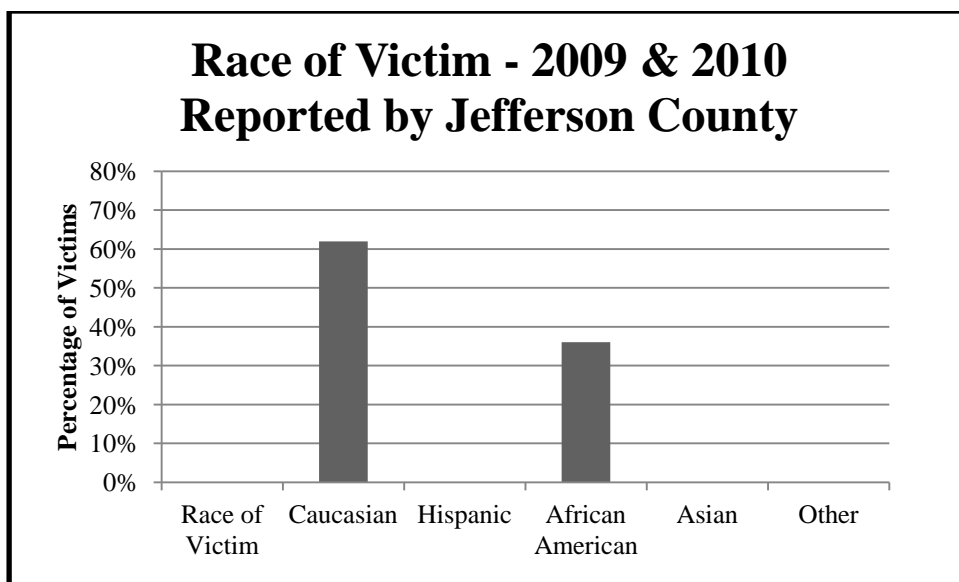
### Demographics

The demographics for both the offender and the victim were recorded (if available) for the 30 researched cases. They were very similar to the demographics recorded by the Louisville Metro DVFRC for 2009 and 2010.

When race was reported, over half of the victims were Caucasian. The next greatest number of victims was identified as African American [see graphs 4& 5].

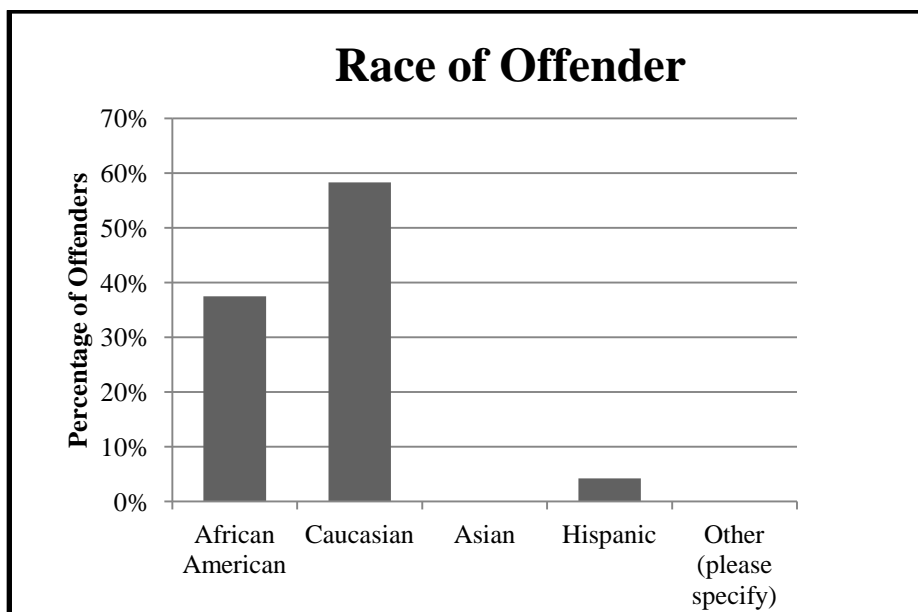


Graph 4

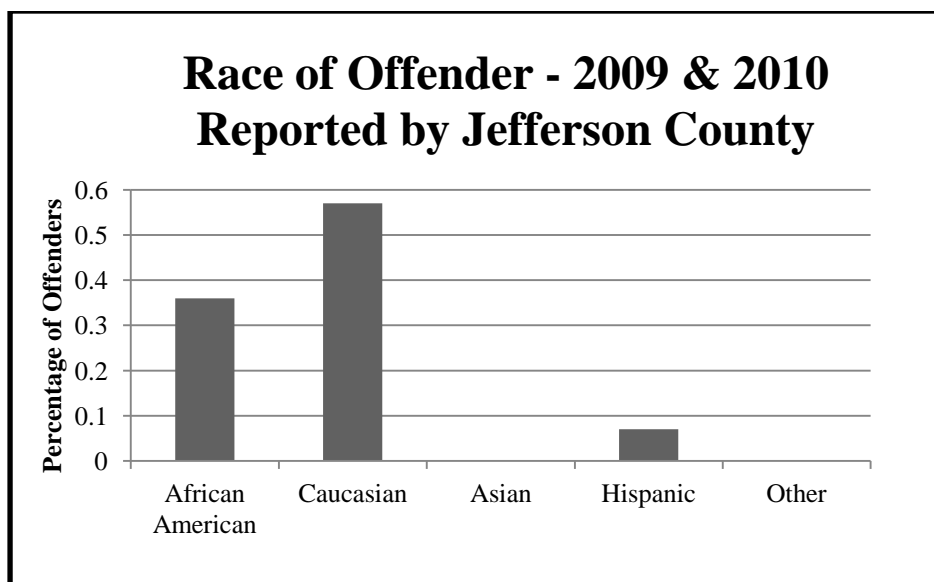


Graph 5

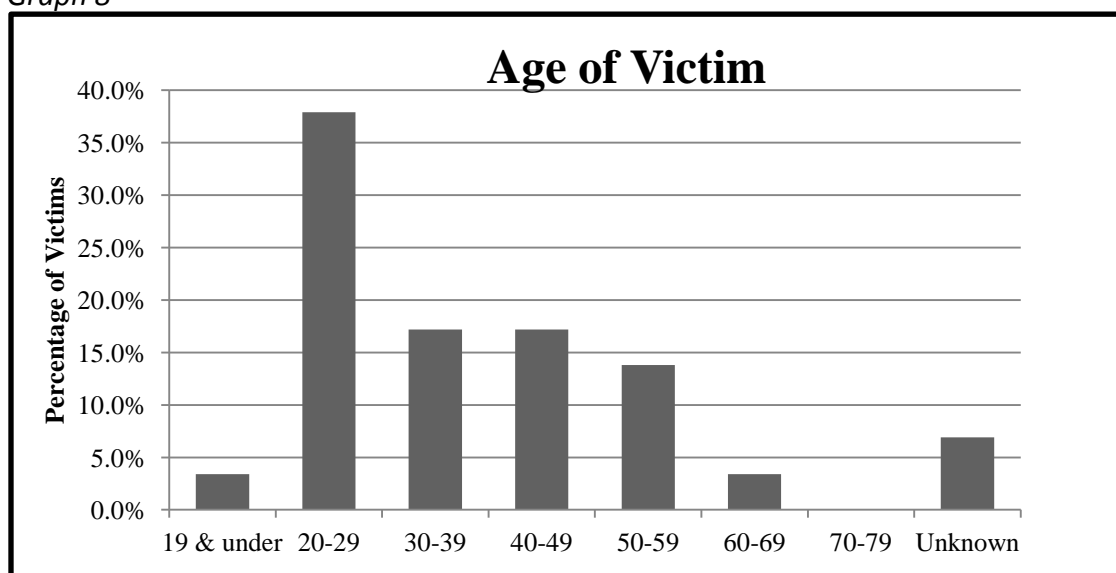
Similarly, the race of the offender for both the current research and the cases reported by the Louisville Metro DVFRC were comparable. Over half of the offenders were identified as Caucasian and the other large portion of offenders were identified as African American [see graphs 6 & 7].

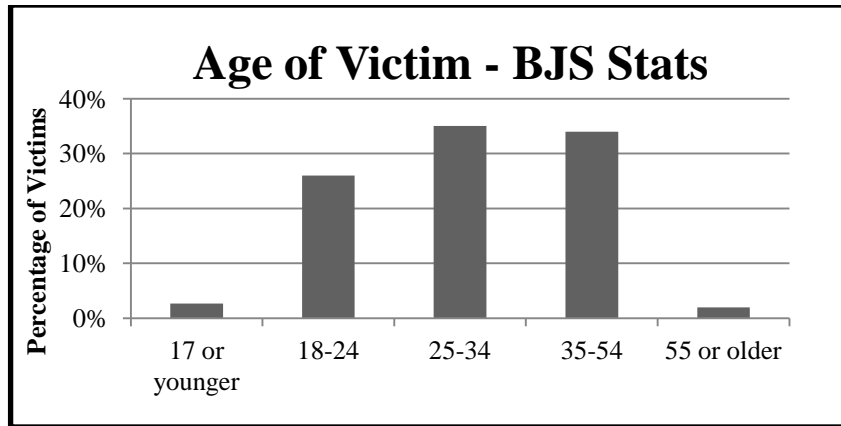


Graph 6

*Graph 7*

The ages of the victim and the offender for the current research were similar to the ages reported by the Bureau of Justice in the “Profile of Intimate Partner Violence Cases in Large Urban Counties,” which included data from 3,750 different cases. Most of the victims in the current research were between the age of 20 and 29 years old [see *graph 8*]. Similarly, the Bureau of Justice reports that over half of the victims are between the age of 18 and 34 years old [see *graph 9*].

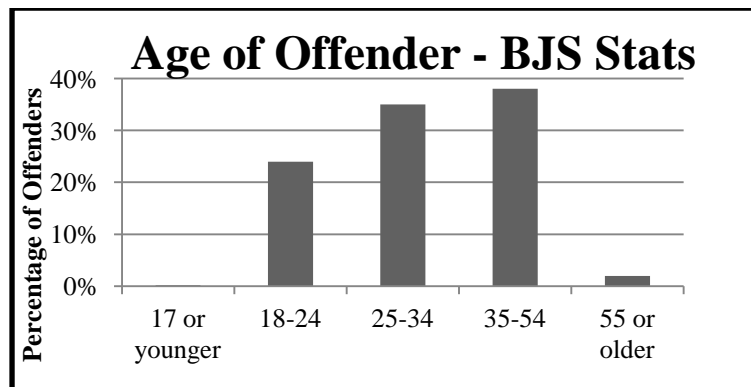
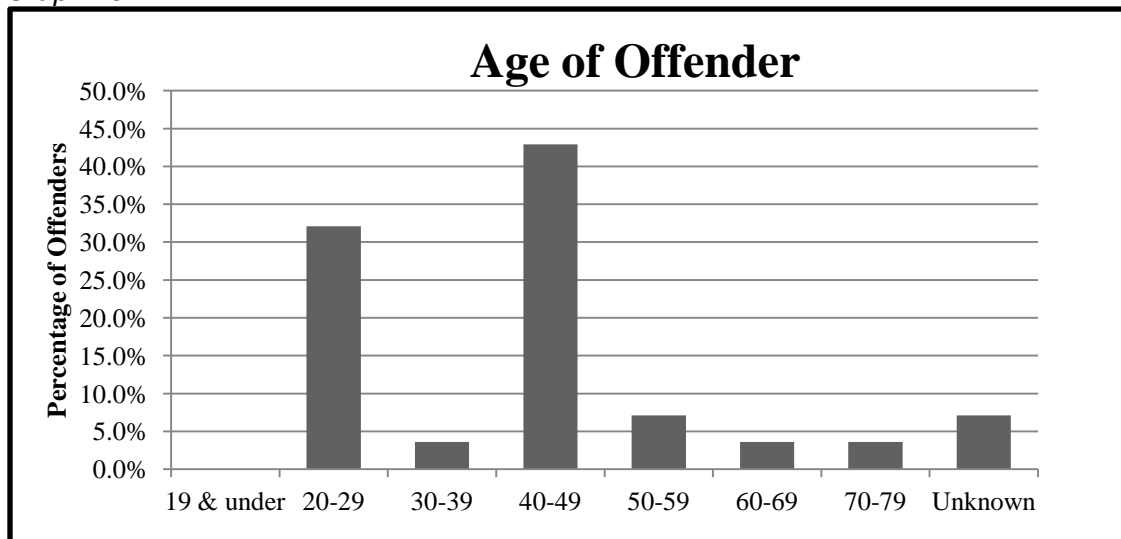
*Graph 8*



Graph 9

The average age of the offender for both the current research and the report by the Bureau of Justice was slightly older than the average age of the victim. Over 43% of offenders in the 30 researched cases were between the ages of 40 and 49, while approximately 32% of the offenders were in their twenties [see graph 10]. The Bureau of Justice reports that over 70% of the offenders were between the ages of 25 and 54 [see graph 11].

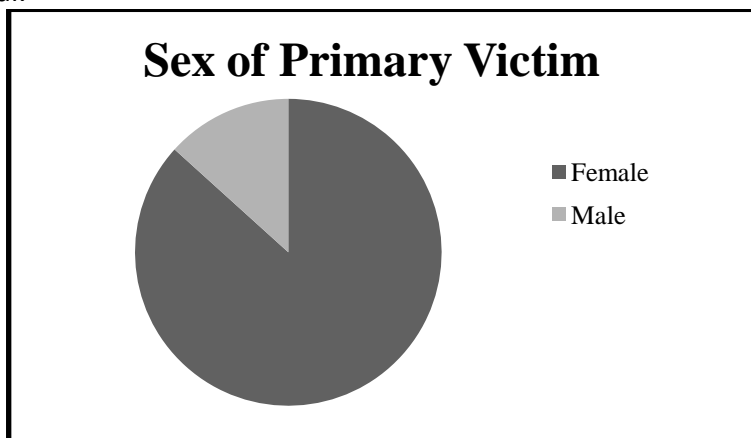
Graph 10



Graph 11

The sex of the victim and the offender were identified for all of the 30 researched cases. The majority of the fatal incidents (96.7%) were committed by the offender. One of the incidents was committed by the victim (the victim murdered the offender). The sex of the primary victim was female for 87% of the cases [see graph 12]. The sex of the offender was male for 87% of the cases [see graph 13]; therefore, all of the relationships used in this research were heterosexual.

Graph 12



Graph 13



Three of the 4 cases in which a female was the offender occurred in 2011. All of the cases involved primary victim homicide. Suicide did not occur in any of the incidents. However, suicide was one of the three leading types of incidents that occurred with male offenders.

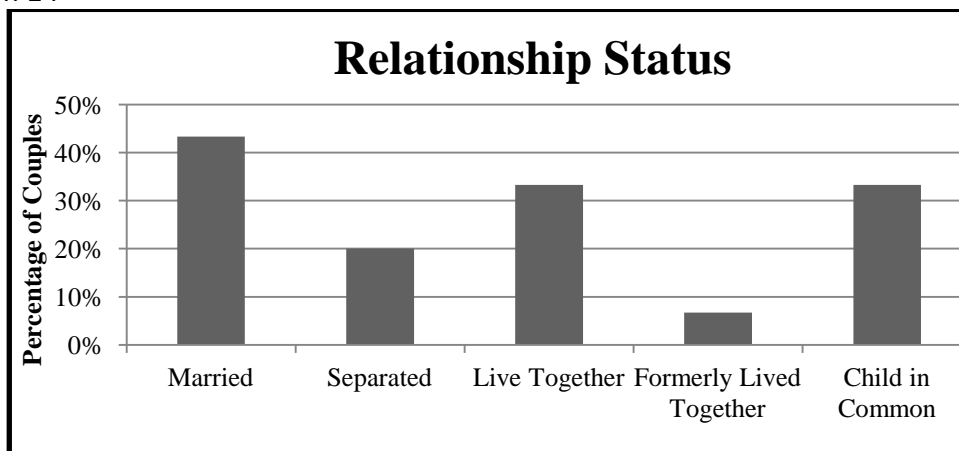
The average age of male victim ages was greater on average than the age of female victims. Male victims were 40-49, 75% of the time. The youngest male victim was in his thirties. The age of the female offenders was the same as their male victims. None of the couples that had male victims were married. All of the couples either currently or formerly lived together and only one of the couples had a child in common. This is worth noting because 43% of male offender/female victim couples were married and 33% of these couples had a child in common [see graph 14]. This could indicate being unmarried is a risk factor for female.

In addition, all of the incidents with female offenders involved blunt force. This is not a common form of homicide by females. However, the significance of finding all of the domestic violence fatalities with female offenders resulted from blunt force is unknown. Half of the offenders had been reported as being previously arrested and the other half was unknown.



None of the male victims had obtained EPO/DVOs against the female offenders. This is something that could be expected, because males are less likely to report physical abuse, especially when it is by a female. Due to social norms, it could be embarrassing for a male to report abuse by a female, however, this research shows that it does occur and can be just as fatal.

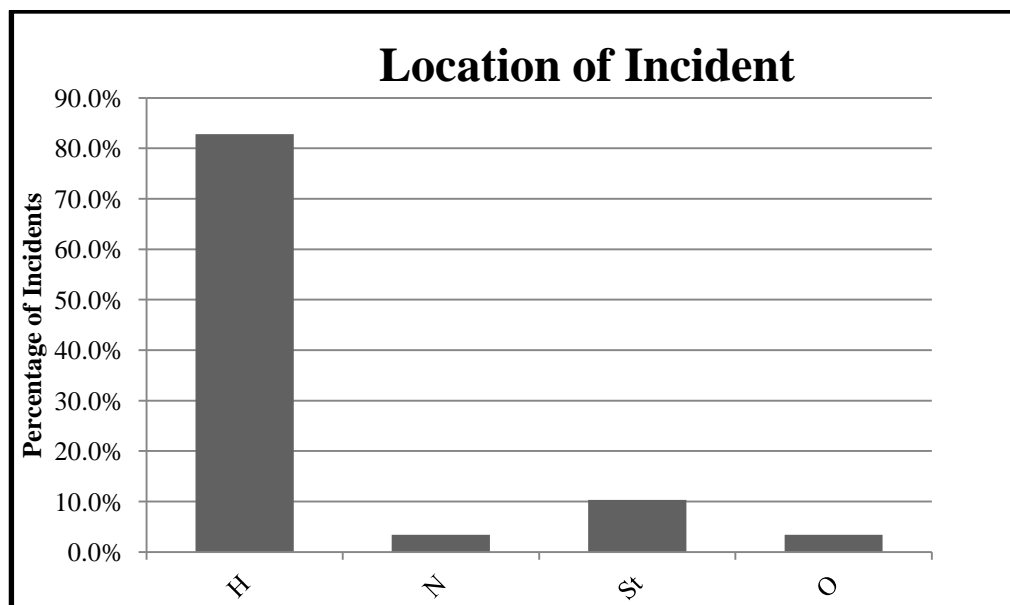
Graph 14

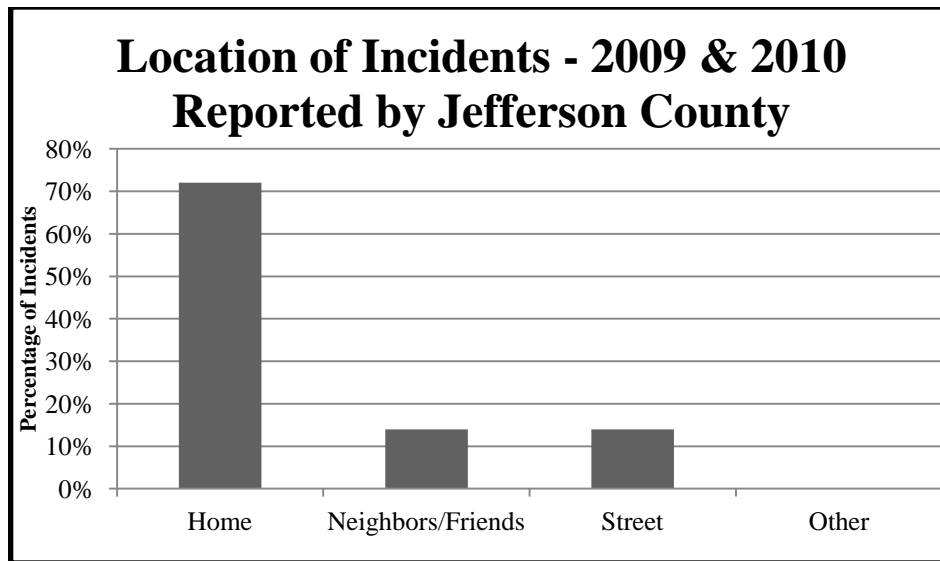


#### Incident Circumstances

The most likely location of the fatal incident was the home for both reports, Jefferson County (2009 & 2010) being 72% and the 30 researched cases for this report being 82.8% [see *graphs 15& 16*]. Both sets of data correspond with national statistics from the Bureau of Justice Statistics which reports that over 60% of nonfatal intimate partner violence occurs in the home.<sup>1</sup>

Graph 15



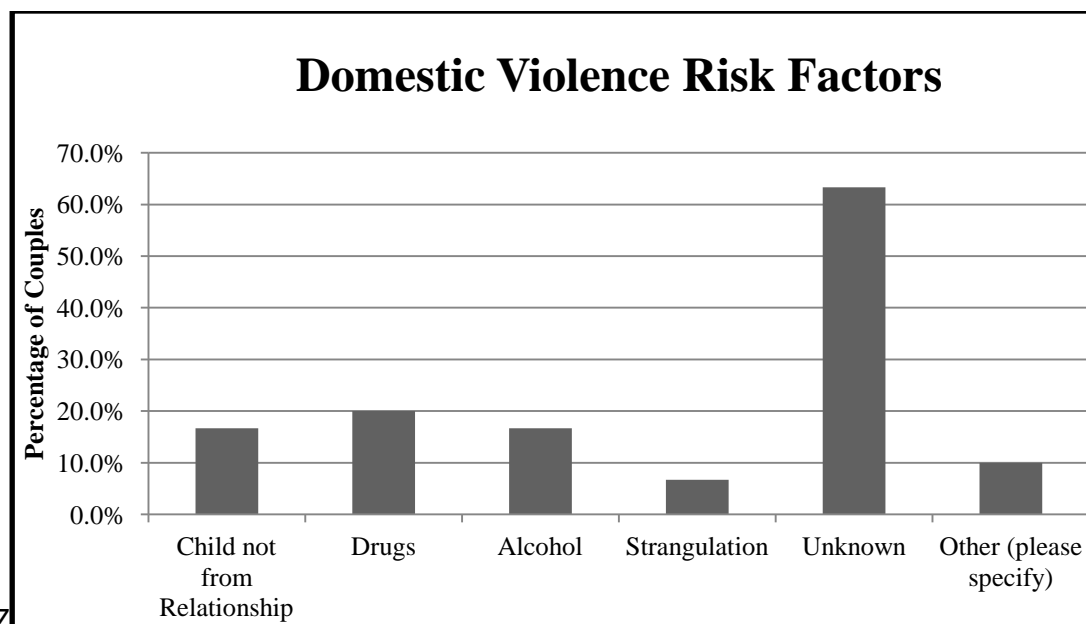


Graph 16

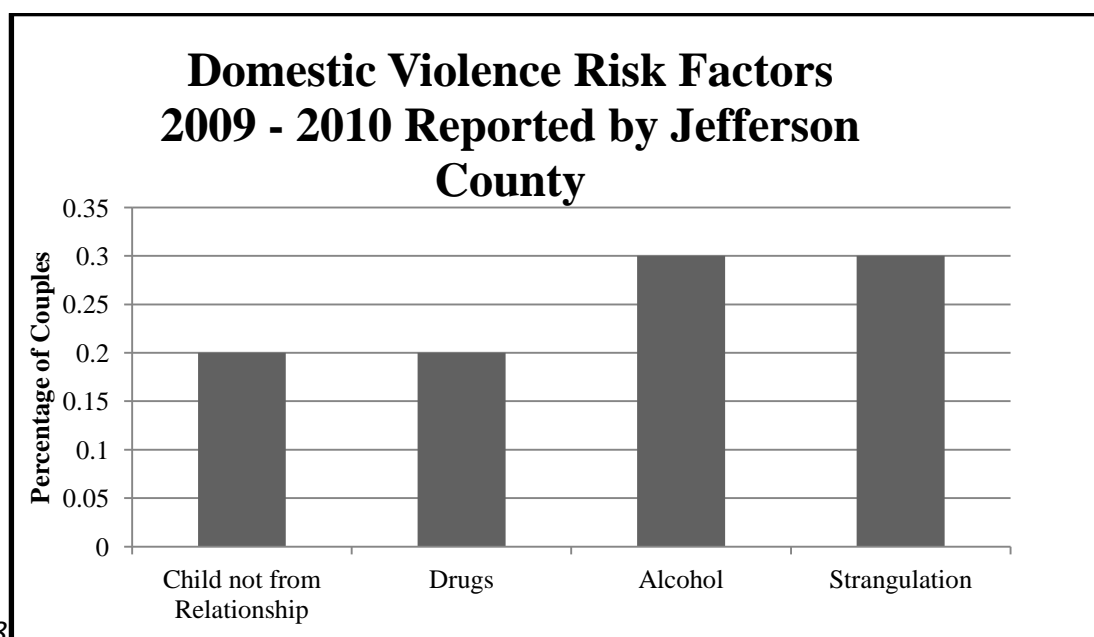
The following charts details possible risks that have been identified as lethality factors contained within the Lethality Assessment tool developed by Jacquelyn Campbell. There have been several risk factors identified as being associated with increased risk of homicides of women and men in violent relationships. The Lethality and Danger Assessment tools are meant to serve as a way to prevent domestic fatalities and measure the amount of risk involved in a particular relationship.

It was difficult to analyze the lethality factors, according to the danger assessment tool, because the data was gathered from public records and publications. These sources did not provide complete details about each individual case. It was more common to not find any additional details which could be identified as lethality risks, so the category of “Unknown” was used to indicate that there were no lethality risks found in the sources available [see graph 17]. The “Other” category was used in case there were other factors not reported on by the Louisville Metro DVFR. The “Other” risk factors that were counted using the 30 cases included a the victim entering new relationship, a criminal record of attempted murder by the offender, and the victim being pregnant.

Both drugs and alcohol were key risk factors in the 30 researched cases and the cases reported by Louisville Metro DVFR [see graph 18]. Strangulation was noted as a risk factor more frequently in the 2009-2010 DVFR cases. This could indicate increased awareness, training and investigation. Signs of strangulation are often subtle.

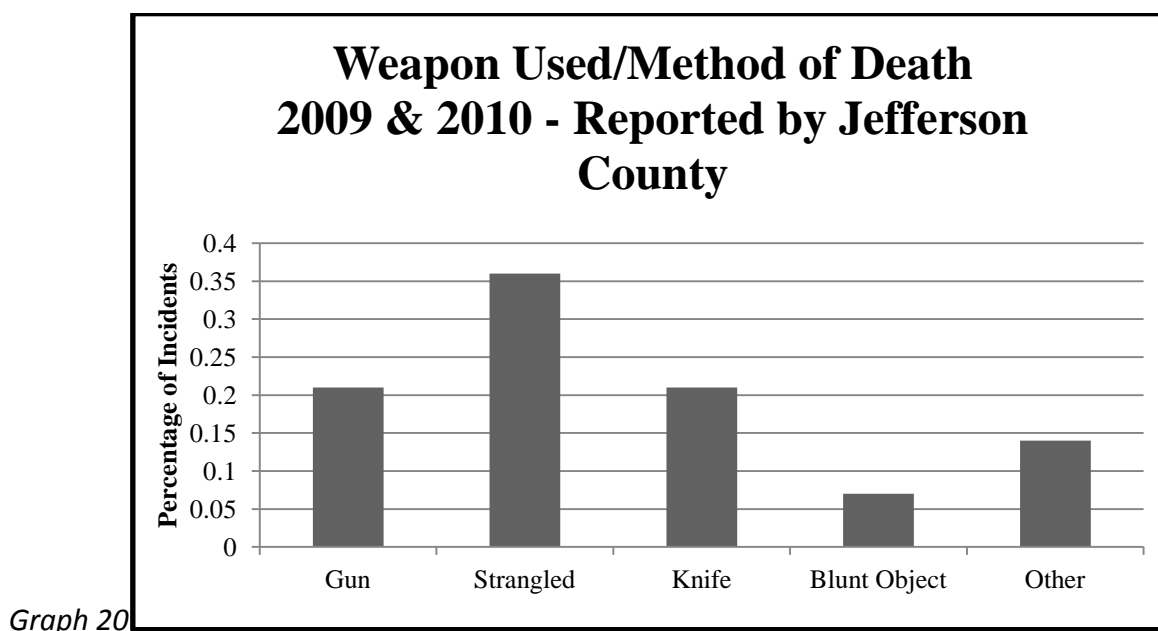
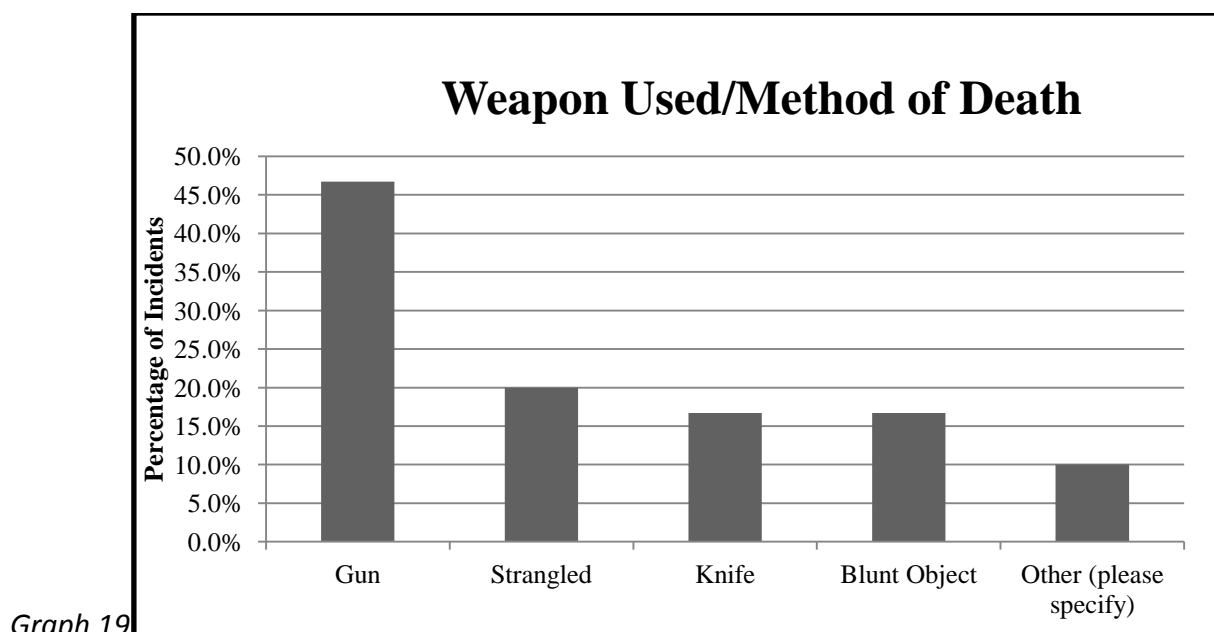


Graph 17



Graph 18

The method of death for the 30 researched domestic violence fatalities was determined by the indicated coroner's report. However, the method of death as reported by the Louisville Metro DVFR was assumed to have been caused by the most lethal weapon used. Despite these discrepancies, both sets of data indicate that gun and strangulation are the most commonly used method of death in domestic violence [see graphs 19 & 20]. Once again, there might have been less reported strangulation in the early cases that were researched, because there is now more awareness.

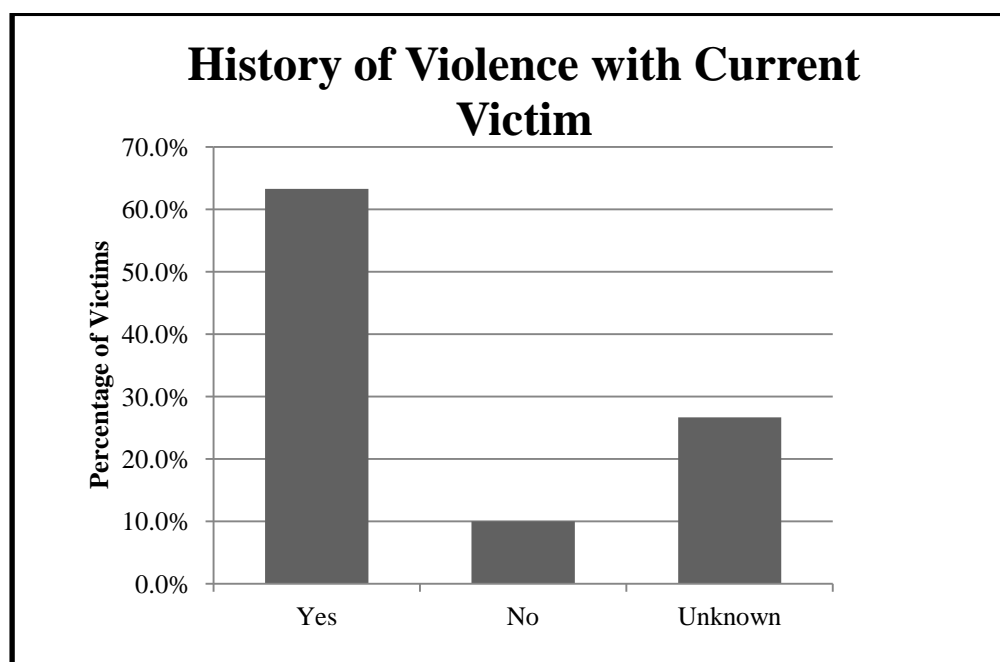


In general, it is a red flag in domestic violence situations when there has been a history of violence by the offender to either the primary victim or past victims. 63.3% of the offenders, in the 30 cases that were reviewed, had a history of violence with the primary victim [see graph 21]. Forty percent of the offenders in the cases had a history of violence with another victim besides the primary victim [see graph 22]. This means that the offender had either a reported past domestic violence history or that there were past EPO/DVO's taken out by other victims against the offender.

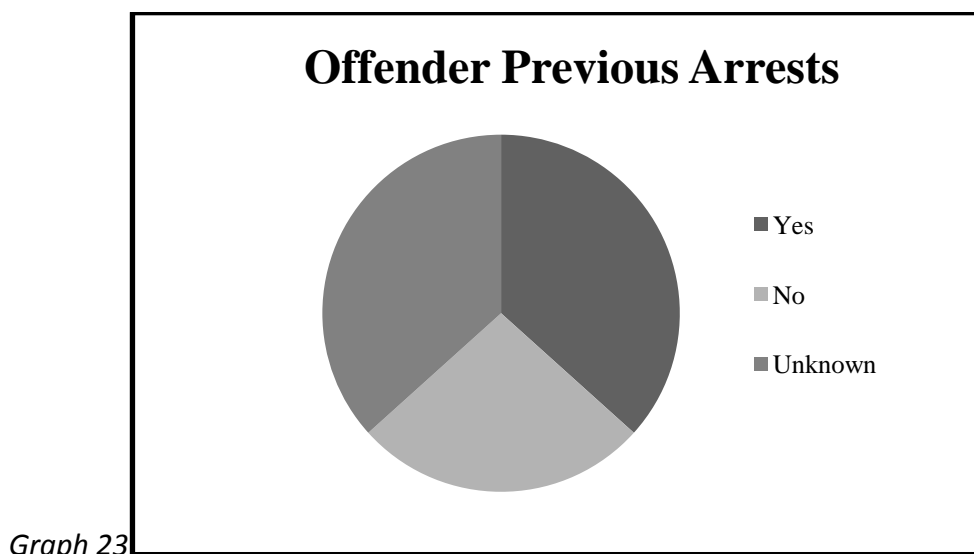
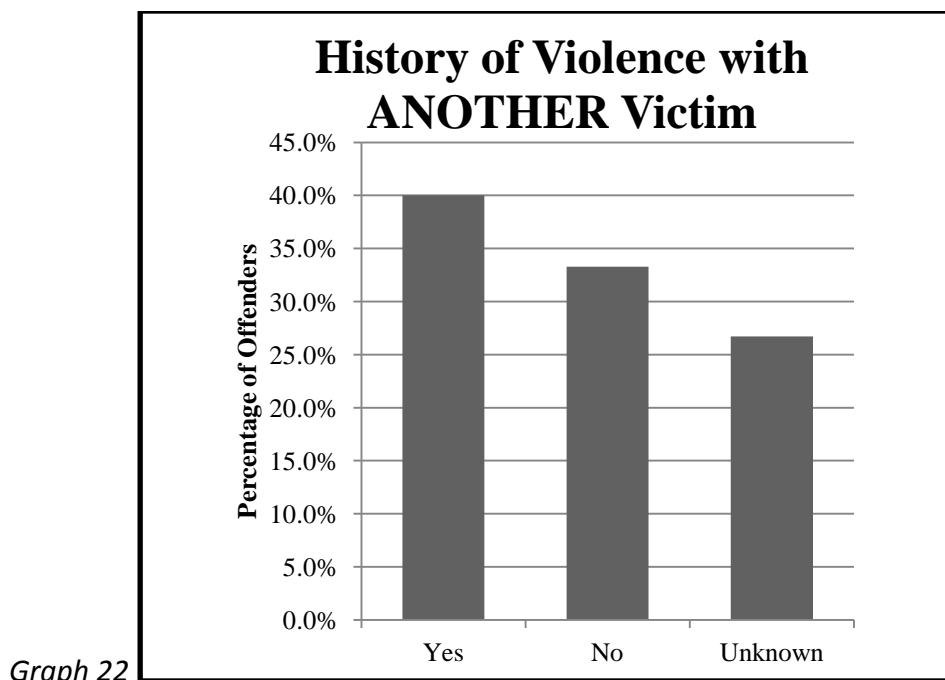
Previous arrests may be an early indicator in domestic violence fatalities. 36.7% of offenders indicated as being previously arrested [see *graph 23*]. Of those previously arrested, 72.7% of the offenders had a past history of violence with the primary victim and 90.9% had a past history of violence with another victim. This shows that offenders of domestic violence who have arrest records are very likely to display a pattern of violence. In addition, 90% of the offenders who had could be identified as having a criminal record murdered the primary victim. The fatal incident occurred 75% of the time within a month of a previous incident for offenders that had an indicated criminal record.

The “unknown” category accounted for 36.7% of offenders. This category was created because of the difficulty locating criminal backgrounds for most offenders. The sources available about each of the cases were not usually detailed enough to give a description of the past history for both offender and victim. Therefore, the “unknown” category accounts for a large portion of the offenders because the criminal background could not be verified.

#### History of Violence



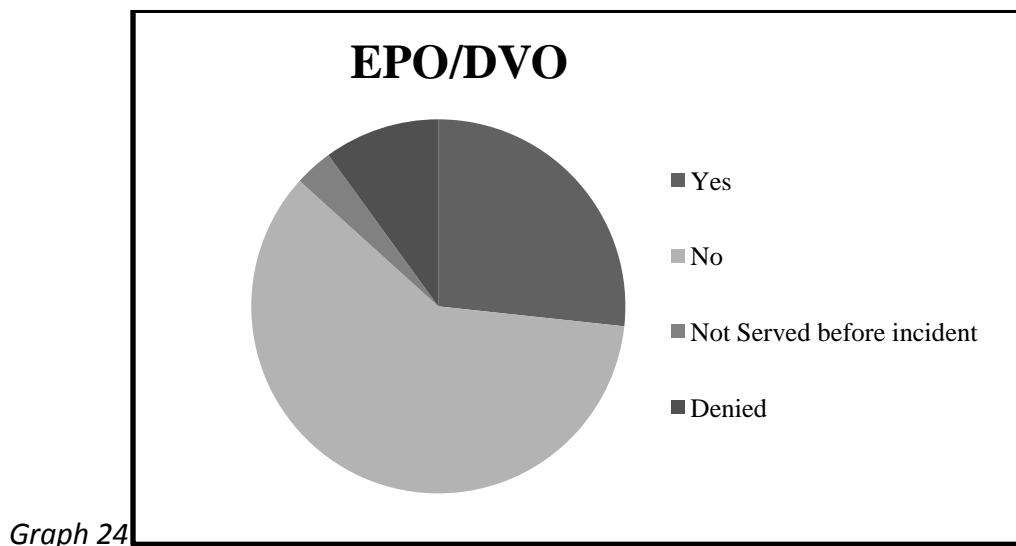
Graph 21



The most interesting information on EPO/DVO's against the offenders was obtained by filtering only the victims who obtained an EPO/DVO [see graph 24]. For these cases, the offender committed suicide 50% of the time. Also, the "other" type of incident category appeared 50% of the time, all of which were attempted homicide of the primary victim. The risk factors that appeared in these cases were "unknown" 100% of the time. The reason for this statistic could be sources assumed that there were risk factors if they were able to obtain an EPO or DVO and did not include them in the report.

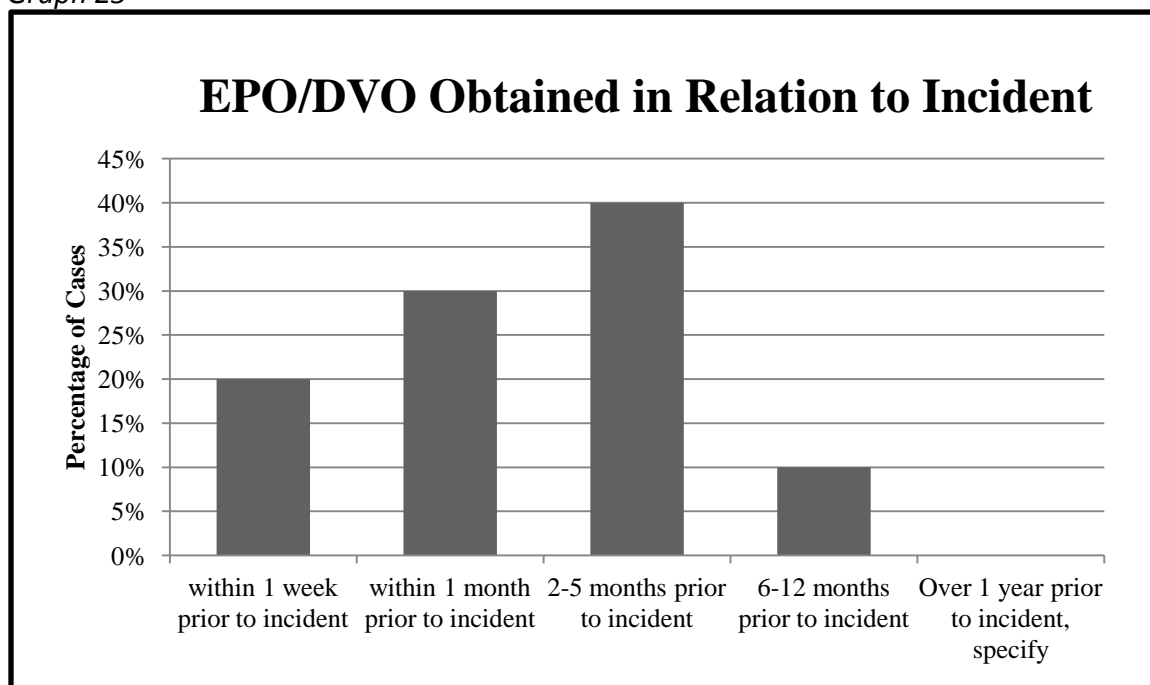
When filtering the data solely for incidents where an EPO or DVO was not obtained, which comprises 60% of the total incidents, 100% of the time the fatal incident occurred within a month of a previous incident. This could imply that an EPO or DVO may have the effect of

interrupting or delaying another domestic violence incident for the victim. The length of time between a previous incident and the fatal incident was longer for individuals who had obtained an EPO/DVO. That could show how vital time is for a victim and the importance of obtaining some form of help as soon as possible.



When focusing on EPO/DVO's that had been obtained by victims against their offender, it seems that all incidents occurred within a year of obtaining the EPO or DVO [see graph 25]. 40% of the EPOs or DVOs were obtained within 2-5 months before the time of the fatal incident, and 30% were obtained within 1 month prior to the fatal incident. These numbers emphasize how vital time is in the domestic violence fatality cases.

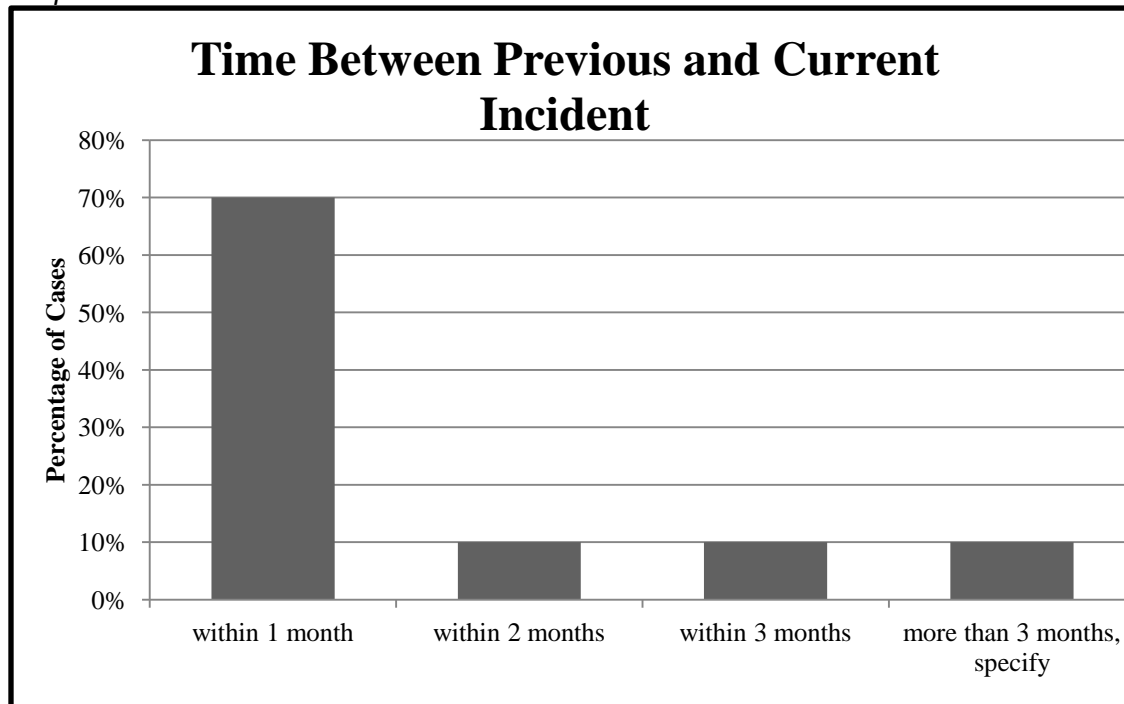
Graph 25



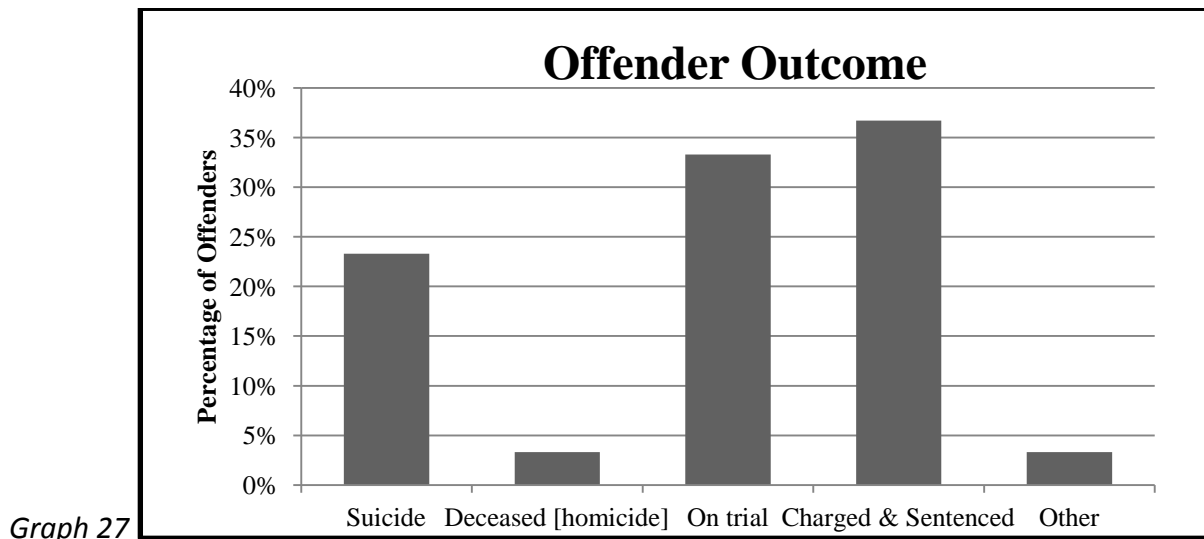
Another time related indicator is the length of time between a reported previous incident and the fatal incident. 70% of reported previous incidents occurred within 1 month before the fatal incident [see *graph 26*]. Therefore, in these incidents resulting in domestic violence fatalities, a recent incident acted as an indicator of greater risk.



Graph 26



The following graph displays the outcome for the offender in each of the 30 cases that were reviewed from 2007-2012:



Graph 27

## Conclusion

In 2009, there were 20 domestic violence homicides in Kentucky and 11 of those homicides occurred in Louisville. The larger population of Louisville/Jefferson County in comparison with the rest of the state partially accounts for the greater number of total domestic violence fatalities. But the statistics point to a need for research at a community level.

This report is incomplete due to limitations of data available to the researcher. However, it provides a framework for continuing domestic violence research by filling in the gaps and examining the implications of the report's findings. For example, pursuing commonalities discovered in this research by filtering out particular indicators. More research could be done related to suicide and domestic violence fatalities. Additional information is needed to determine whether the 50% rate of suicide by the offender in cases resulting in suicide is typical when the victim has obtained an EPO/DVO. All incidents examined in this report involving suicide also involved homicide or attempted homicide.

Another area for further study highlighted in the results from this report is female offenders and the four domestic violence homicides. Questions to be pursued include: Were these blunt force homicides by females an anomaly? Are females committing more violent crime in general? What if any role did substance abuse and mental illness contribute?

There are many services available in Louisville, Kentucky for domestic violence victims, but they cannot be as effective as possible if they don't know what services are the most important to provide and to whom they should be provided.